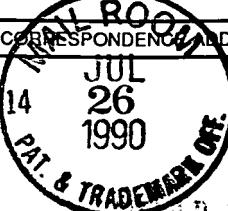


## PART B - ISSUE FEE TRANSMITTAL

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
 RONALD A. DAIGNAULT PATENT REPRESENTATIVE WARNER-LAMBERT COMPANY 2800 PLYMOUTH ROAD ANN ARBOR, MI 48105		INVENTOR'S NAME Street Address City, State and ZIP Code CO-INVENTOR'S NAME Street Address City, State and ZIP Code	
		<input type="checkbox"/> Check if additional changes are on reverse side	

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
PT10286 08/02/90	08/02/90	093	173931, 3	PT5 08/02/90
First Name Applicant:		TITLE OF INVENTION		
RONALD A. DAIGNAULT		SPHERICALLY EMBODIED CONTRACEPTIVE		

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
PT10286	514-170-0931	PT5	UTILITY	NO	620.00	08/02/90

3. Further correspondence to be mailed to the following:		4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.	
Ronald A. Daignault Warner-Lambert Company 2800 Plymouth Road Ann Arbor, MI 48105		1 <u>Ronald A. Daignault</u> 2 _____ 3 _____	

PT10286 08/02/90 07340974	DO NOT USE THIS SPACE 142	620.00
PT10287 08/02/90 07340974	23-0450 010 501	37.50

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)		6a. The following fees are enclosed:	
(1) NAME OF ASSIGNEE:  Warner-Lambert Company		<input type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies _____	
(2) ADDRESS: (City & State or County)  201 Tabor Road, Morris Plains, NJ 07950		6b. The following fees should be charged to: (Minimum of 10)  DEPOSIT ACCOUNT NUMBER <u>23-0450</u>	
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION  Delaware		<input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advanced Order - # of Copies <u>25</u> <input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees (Minimum of 10)	

A. <input type="checkbox"/> This application is NOT assigned.		The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.	
<input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office.		(Signature of party in interest of record) <u>Ronald A. Daignault</u> (Date) <u>7/16/90</u>	
<input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.		NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.	
<b>PLEASE NOTE:</b> Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.			

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

## Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Box ISSUE FEE  
Commissioner of Patents and Trademarks  
Washington, D.C. 20231

on July 24, 1990  
(Date)

Cindy Malocha  
(Name of person making deposit)

Cindy Malocha  
(Signature)

7-24-90  
(Date)

Note: If this certificate of mailing is used, it can only be used to transmit the Issue Fee. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawings, must have its own certificate of mailing.

This form is estimated to take 20 minutes to complete. Time will vary depending upon the needs of the individual applicant. Any comments on the amount of time you require to complete this form should be sent to the Office of Management and Organization, Patent and Trademark Office, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.